

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS15 FEB 13 PM 1:56
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Bill Cassidy for US Senate

ADDRESS (number and street)

PO Box 80505



Check if different than previously reported. (ACC)

Baton Rouge

LA

70898-0505

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00543983

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

LA

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

5. Covering Period

M M / D D / Y Y Y Y
08 03 2014M M / D D / Y Y Y Y
08 03 2014M M / D D / Y Y Y Y
08 03 2014

through

M M / D D / Y Y Y Y
09 30 2014M M / D D / Y Y Y Y
09 30 2014M M / D D / Y Y Y Y
09 30 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ralph Stephens

Signature of Treasurer

Ralph Stephens

Date

M M / D D / Y Y Y Y
02 09 2015M M / D D / Y Y Y Y
02 09 2015M M / D D / Y Y Y Y
02 09 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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(Revised 02/2003)